

## **Exhibit B**

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

<b>A. NAME &amp; PHONE OF CONTACT AT FILER [optional]</b>
Corporation Service Company 800-858-5294

<b>B. SEND ACKNOWLEDGMENT TO:</b> (Name and Address) CORPORATION SERVICE COMPANY 801 ADLAI STEVENSON DRIVE SPRINGFIELD, IL 62703 USA
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DOCUMENT NUMBER: 27188050002  
FILING NUMBER: 10-7253637387  
FILING DATE: 12/07/2010 17:09  
IMAGE GENERATED ELECTRONICALLY FOR XML FILING  
THE ABOVE SPACE IS FOR CA FILING OFFICE USE ONLY

**1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names**

<b>1a. ORGANIZATION'S NAME</b> I2A Technologies, Inc.	<b>1b. INDIVIDUAL'S LAST NAME</b>	<b>FIRST NAME</b>	<b>MIDDLE NAME</b>	<b>SUFFIX</b>
<b>1c. MAILING ADDRESS</b> 3399 West Warren Avenue				
CITY Fremont STATE CA POSTAL CODE 94538 COUNTRY USA				
<b>1d. SEE INSTRUCTIONS</b>	<b>ADD'L DEBTOR INFO</b>	<b>1e. TYPE OF ORGANIZATION</b> Corporation	<b>1f. JURISDICTION OF ORGANIZATION</b> CA	<b>1g. ORGANIZATIONAL ID#, if any</b> C2744103 <input type="checkbox"/> NONE

**2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names**

<b>2a. ORGANIZATION'S NAME</b>	<b>2b. INDIVIDUAL'S LAST NAME</b>	<b>FIRST NAME</b>	<b>MIDDLE NAME</b>	<b>SUFFIX</b>
<b>2c. MAILING ADDRESS</b>				
CITY STATE POSTAL CODE COUNTRY				
<b>2d. SEE INSTRUCTIONS</b>	<b>ADD'L DEBTOR INFO</b>	<b>2e. TYPE OF ORGANIZATION</b>	<b>2f. JURISDICTION OF ORGANIZATION</b>	<b>2g. ORGANIZATIONAL ID#, if any</b> <input type="checkbox"/> NONE

**3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)**

<b>3a. ORGANIZATION'S NAME</b> Heritage Bank of Commerce	<b>3b. INDIVIDUAL'S LAST NAME</b>	<b>FIRST NAME</b>	<b>MIDDLE NAME</b>	<b>SUFFIX</b>
<b>3c. MAILING ADDRESS</b> 150 Almaden Boulevard				
CITY STATE POSTAL CODE COUNTRY				

**4. This FINANCING STATEMENT covers the following collateral:**

ALL MACHINERY, EQUIPMENT AND FURNITURE, FIXTURES, including without limitation property that is or will become fixtures, INVENTORY, ACCOUNTS, INSTRUMENTS, GENERAL INTANGIBLES, CHATTEL PAPER AND DOCUMENTS, WHEREVER LOCATED, EXCLUDING TITLED MOTOR VEHICLES; whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and accounts proceeds).

**5. ALT DESIGNATION:**  LESSEE/LESSOR  CONSIGNEE/CONSIGNOR  BAILEE/BAILOR  SELLER/BUYER  AG. LIEN  NON-UCC FILING

**6. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS**  
Attach Addendum [if applicable]

**7. Check to REQUEST SEARCH REPORT(S) on Debtor(s)**  
[ADDITIONAL FEE]  optional  All Debtors  Debtor 1  Debtor 2

**8. OPTIONAL FILER REFERENCE DATA**

Ann and Victor Batinovich [54560894]

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# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]  
Corporation Service Company  
800-858-5294

B. SEND ACKNOWLEDGMENT TO: (Name and Address)  
CORPORATION SERVICE COMPANY  
801 ADLAI STEVENSON DRIVE  
SPRINGFIELD, IL 62703  
USA

DOCUMENT NUMBER: 28063650002  
FILING NUMBER: 11-7261826004  
FILING DATE: 02/25/2011 15:42  
IMAGE GENERATED ELECTRONICALLY FOR XML FILING  
THE ABOVE SPACE IS FOR CA FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

<input type="checkbox"/> 1a. ORGANIZATION'S NAME I2A Technologies, Inc.	<input type="checkbox"/> 1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
OR				
1c. MAILING ADDRESS 3399 West Warren Avenue	CITY Fremont	STATE CA	POSTAL CODE 94538	COUNTRY USA
1d. SEE INSTRUCTIONS	ADD'L DEBTOR INFO	1e. TYPE OF ORGANIZATION Corporation	1f. JURISDICTION OF ORGANIZATION CA	1g. ORGANIZATIONAL ID#, if any C2744103
<input type="checkbox"/> NONE				

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

<input type="checkbox"/> 2a. ORGANIZATION'S NAME	<input type="checkbox"/> 2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
OR				
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2d. SEE INSTRUCTIONS	ADD'L DEBTOR INFO	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID#, if any <input type="checkbox"/> NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

<input type="checkbox"/> 3a. ORGANIZATION'S NAME Heritage Bank of Commerce	<input type="checkbox"/> 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
OR				
3c. MAILING ADDRESS 150 Almaden Boulevard	CITY San Jose	STATE CA	POSTAL CODE 95113	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

Model Microtech MT-560TVC screen printer and all accessories

5. ALT DESIGNATION:  LESSEE/LESSOR  CONSIGNEE/CONSIGNOR  BAILEE/BAILOR  SELLER/BUYER  AG. LIEN  NON-UCC FILING

<input type="checkbox"/> 6. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Attach Addendum [if applicable]	<input type="checkbox"/> 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] <input type="checkbox"/> [optional] <input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA

Victor Batinovich [56313354]

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# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

<b>A. NAME &amp; PHONE OF CONTACT AT FILER [optional]</b>
Corporation Service Company 800-858-5294

<b>B. SEND ACKNOWLEDGMENT TO:</b> (Name and Address) CORPORATION SERVICE COMPANY 801 ADLAI STEVENSON DRIVE SPRINGFIELD, IL 62703 USA
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DOCUMENT NUMBER: 28990060002  
FILING NUMBER: 11-7270103678  
FILING DATE: 05/18/2011 11:34  
IMAGE GENERATED ELECTRONICALLY FOR XML FILING  
THE ABOVE SPACE IS FOR CA FILING OFFICE USE ONLY

**1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names**

<b>1a. ORGANIZATION'S NAME</b> I2A Technologies, Inc.	<b>1b. INDIVIDUAL'S LAST NAME</b>	<b>FIRST NAME</b>	<b>MIDDLE NAME</b>	<b>SUFFIX</b>
<b>1c. MAILING ADDRESS</b> 3399 West Warren Avenue				
CITY Fremont STATE CA POSTAL CODE 94538 COUNTRY USA				
<b>1d. SEE INSTRUCTIONS</b>	<b>ADD'L DEBTOR INFO</b>	<b>1e. TYPE OF ORGANIZATION</b> Corporation	<b>1f. JURISDICTION OF ORGANIZATION</b> CA	<b>1g. ORGANIZATIONAL ID#, if any</b> C2744103 <input type="checkbox"/> NONE

**2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names**

<b>2a. ORGANIZATION'S NAME</b>	<b>2b. INDIVIDUAL'S LAST NAME</b>	<b>FIRST NAME</b>	<b>MIDDLE NAME</b>	<b>SUFFIX</b>
<b>2c. MAILING ADDRESS</b>				
CITY STATE POSTAL CODE COUNTRY				
<b>2d. SEE INSTRUCTIONS</b>	<b>ADD'L DEBTOR INFO</b>	<b>2e. TYPE OF ORGANIZATION</b>	<b>2f. JURISDICTION OF ORGANIZATION</b>	<b>2g. ORGANIZATIONAL ID#, if any</b> <input type="checkbox"/> NONE

**3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)**

<b>3a. ORGANIZATION'S NAME</b> Heritage Bank of Commerce	<b>3b. INDIVIDUAL'S LAST NAME</b>	<b>FIRST NAME</b>	<b>MIDDLE NAME</b>	<b>SUFFIX</b>
<b>3c. MAILING ADDRESS</b> 150 Almaden Boulevard				
CITY San Jose STATE CA POSTAL CODE 95113 COUNTRY USA				

**4. This FINANCING STATEMENT covers the following collateral:**

Speedline Die Cleaner, model Accel Microcel 2 - Serial Number 24-M2F-1130

**5. ALT DESIGNATION:**  LESSEE/LESSOR  CONSIGNEE/CONSIGNOR  BAILEE/BAILOR  SELLER/BUYER  AG. LIEN  NON-UCC FILING

**6. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS**  
Attach Addendum [if applicable]

**7. Check to REQUEST SEARCH REPORT(S) on Debtor(s)**  
[ADDITIONAL FEE]  [optional]  All Debtors  Debtor 1  Debtor 2

**8. OPTIONAL FILER REFERENCE DATA**

Victor Batinovich [58356775]

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# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

<b>A. NAME &amp; PHONE OF CONTACT AT FILER [optional]</b>
Corporation Service Company 800-858-5294

<b>B. SEND ACKNOWLEDGMENT TO:</b> (Name and Address) CORPORATION SERVICE COMPANY 801 ADLAI STEVENSON DRIVE SPRINGFIELD, IL 62703 USA
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DOCUMENT NUMBER: 29564620002  
FILING NUMBER: 11-7276139118  
FILING DATE: 07/08/2011 09:06  
IMAGE GENERATED ELECTRONICALLY FOR XML FILING  
THE ABOVE SPACE IS FOR CA FILING OFFICE USE ONLY

**1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names**

<b>1a. ORGANIZATION'S NAME</b> I2A Technologies, Inc.	<b>1b. INDIVIDUAL'S LAST NAME</b>	<b>FIRST NAME</b>	<b>MIDDLE NAME</b>	<b>SUFFIX</b>
<b>1c. MAILING ADDRESS</b> 3399 West Warren Avenue		CITY Fremont	STATE CA	POSTAL CODE 94538
<b>1d. SEE INSTRUCTIONS</b>	<b>ADD'L DEBTOR INFO</b>	<b>1e. TYPE OF ORGANIZATION</b> Corporation	<b>1f. JURISDICTION OF ORGANIZATION</b> CA	<b>1g. ORGANIZATIONAL ID#, if any</b> C2744103

**2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names**

<b>2a. ORGANIZATION'S NAME</b>	<b>2b. INDIVIDUAL'S LAST NAME</b>	<b>FIRST NAME</b>	<b>MIDDLE NAME</b>	<b>SUFFIX</b>
<b>2c. MAILING ADDRESS</b>		CITY	STATE	POSTAL CODE
<b>2d. SEE INSTRUCTIONS</b>	<b>ADD'L DEBTOR INFO</b>	<b>2e. TYPE OF ORGANIZATION</b>	<b>2f. JURISDICTION OF ORGANIZATION</b>	<b>2g. ORGANIZATIONAL ID#, if any</b>

**3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)**

<b>3a. ORGANIZATION'S NAME</b> Heritage Bank of Commerce	<b>3b. INDIVIDUAL'S LAST NAME</b>	<b>FIRST NAME</b>	<b>MIDDLE NAME</b>	<b>SUFFIX</b>
<b>3c. MAILING ADDRESS</b> 150 Almaden Boulevard		CITY San Jose	STATE CA	POSTAL CODE 95113

**4. This FINANCING STATEMENT covers the following collateral:**

X-Ray Machine with 450X Magnification, 90kV micro-focus, XYZ and tilt function, max board size 500x400mm, max inspection area 460x340mm. X-Ray System: OTI Serial #507

**5. ALT DESIGNATION:**  LESSEE/LESSOR  CONSIGNEE/CONSIGNOR  BAILEE/BAILOR  SELLER/BUYER  AG. LIEN  NON-UCC FILING

**6. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS**  
Attach Addendum [if applicable]

**7. Check to REQUEST SEARCH REPORT(S) on Debtor(s)**  
[ADDITIONAL FEE]  [optional]  All Debtors  Debtor 1  Debtor 2

**8. OPTIONAL FILER REFERENCE DATA**

Victor Batinovich [59499261]

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# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]
Corporation Service Company 800-858-5294

B. SEND ACKNOWLEDGMENT TO: (Name and Address)
CORPORATION SERVICE COMPANY 801 ADLAI STEVENSON DRIVE SPRINGFIELD, IL 62703 USA

DOCUMENT NUMBER: 29637180002  
FILING NUMBER: 11-7276842492  
FILING DATE: 07/14/2011 13:21  
IMAGE GENERATED ELECTRONICALLY FOR XML FILING  
THE ABOVE SPACE IS FOR CA FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME I2A Technologies, Inc.	1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
OR				
1c. MAILING ADDRESS 3399 West Warren Avenue	CITY Fremont	STATE CA	POSTAL CODE 94538	COUNTRY USA
1d. SEE INSTRUCTIONS	ADD'L DEBTOR INFO	1e. TYPE OF ORGANIZATION Corporation	1f. JURISDICTION OF ORGANIZATION CA	1g. ORGANIZATIONAL ID#, if any C2744103
D NONE				

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME	2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
OR				
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2d. SEE INSTRUCTIONS	ADD'L DEBTOR INFO	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID#, if any D NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME Heritage Bank of Commerce	3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
OR				
3c. MAILING ADDRESS 150 Almaden Boulevard	CITY San Jose	STATE CA	POSTAL CODE 95113	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

ADT Machine-LA precision saw with HP spindle for 12 in. semiconductor wafer.  
Part/Model #7100 - Serial #LSS58406-1

5. ALT DESIGNATION:  LESSEE/LESSOR  CONSIGNEE/CONSIGNOR  BAILEE/BAILOR  SELLER/BUYER  AG. LIEN  NON-UCC FILING

6. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS  
Attach Addendum [if applicable]

7. Check to REQUEST SEARCH REPORT(S) on Debtor(s)  
[ADDITIONAL FEE]  [optional]  All Debtors  Debtor 1  Debtor 2

8. OPTIONAL FILER REFERENCE DATA

Victor Batinovich [59641406]

FILING OFFICE COPY

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

<b>A. NAME &amp; PHONE OF CONTACT AT FILER [optional]</b>
Corporation Service Company 800-858-5294

<b>B. SEND ACKNOWLEDGMENT TO:</b> (Name and Address) CORPORATION SERVICE COMPANY 801 ADLAI STEVENSON DRIVE SPRINGFIELD, IL 62703 USA
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DOCUMENT NUMBER: 30210100002  
FILING NUMBER: 11-7283257450  
FILING DATE: 09/01/2011 14:32  
IMAGE GENERATED ELECTRONICALLY FOR XML FILING  
THE ABOVE SPACE IS FOR CA FILING OFFICE USE ONLY

**1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names**

<b>1a. ORGANIZATION'S NAME</b> I2A Technologies, Inc.	<b>1b. INDIVIDUAL'S LAST NAME</b>	<b>FIRST NAME</b>	<b>MIDDLE NAME</b>	<b>SUFFIX</b>
<b>1c. MAILING ADDRESS</b> 3399 West Warren Avenue				
CITY Fremont STATE CA POSTAL CODE 94538 COUNTRY USA				
<b>1d. SEE INSTRUCTIONS</b>	<b>ADD'L DEBTOR INFO</b>	<b>1e. TYPE OF ORGANIZATION</b> Corporation	<b>1f. JURISDICTION OF ORGANIZATION</b> CA	<b>1g. ORGANIZATIONAL ID#, if any</b> C2744103 <input type="checkbox"/> NONE

**2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names**

<b>2a. ORGANIZATION'S NAME</b>	<b>2b. INDIVIDUAL'S LAST NAME</b>	<b>FIRST NAME</b>	<b>MIDDLE NAME</b>	<b>SUFFIX</b>
<b>2c. MAILING ADDRESS</b>				
CITY STATE POSTAL CODE COUNTRY				
<b>2d. SEE INSTRUCTIONS</b>	<b>ADD'L DEBTOR INFO</b>	<b>2e. TYPE OF ORGANIZATION</b>	<b>2f. JURISDICTION OF ORGANIZATION</b>	<b>2g. ORGANIZATIONAL ID#, if any</b> <input type="checkbox"/> NONE

**3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)**

<b>3a. ORGANIZATION'S NAME</b> Heritage Bank of Commerce	<b>3b. INDIVIDUAL'S LAST NAME</b>	<b>FIRST NAME</b>	<b>MIDDLE NAME</b>	<b>SUFFIX</b>
<b>3c. MAILING ADDRESS</b> 150 Almaden Boulevard				
CITY San Jose STATE CA POSTAL CODE 95113 COUNTRY USA				

**4. This FINANCING STATEMENT covers the following collateral:**

ADT Machine-LA precision saw with HP spindle for 12 in. semiconductor wafer.  
Part/Model #7100 - Serial #LSS58406-2

**5. ALT DESIGNATION:**  LESSEE/LESSOR  CONSIGNEE/CONSIGNOR  BAILEE/BAILOR  SELLER/BUYER  AG. LIEN  NON-UCC FILING

<b>6. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS</b> Attach Addendum [if applicable]	<b>7. Check to REQUEST SEARCH REPORT(S) on Debtor(s)</b> [ADDITIONAL FEE] <input type="checkbox"/> optional <input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2
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**8. OPTIONAL FILER REFERENCE DATA**

Victor Batinovich [60742483]

FILING OFFICE COPY